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**REQUEST FOR WITHDRAWAL
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Application Number	10/813,288
Filing Date	March 29, 2004
First Named Inventor	Jonathan Castle
Art Unit	2632
Examiner Name	Hunnings, Travis R.
Attorney Docket Number	022048-000100US

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
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The reasons for this request are:

Discontinuation of attorney/client relationship.

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<input checked="" type="checkbox"/> Firm or Individual Name	Kevin LeMond at Schwabe, Williamson & Wyatt				
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Date	April 3, 2006		Telephone No.	925.472.5000	

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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